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FM AMEMBASSY PHNOM PENH
TO RUEHC/SECSTATE WASHDC 0855
RUEHBK/AMEMBASSY BANGKOK 2735
RUCNASE/ASEAN MEMBER COLLECTIVE
RUEHPH/CDC ATLANTA GA
RUEAUSA/DEPT OF HHS WASHINGTON DC
RUEHRC/DEPT OF AGRICULTURE WASHINGTON DC
RUEHGV/USMISSION GENEVA 1701
RUEKJCS/SECDEF WASHINGTON DC

UNCLAS PHNOM PENH 000421

SENSITIVE SIPDIS

STATE FOR EAP/MLS, G/AIAG, OES/IHA, MED STATE FOR USAID/ANE, OFDA AND GH BANGKOK FOR REO/HHOWARD BANGKOK FOR OFDA CDC FOR NCIRD/NCOX, JBRESE, TMOUNTS

E.O. 12958: N/A

TAGS: KFLU AEMR ASEC CASC KFLO TBIO KSAF KPAO PREL PINR

AMGT, MG, EAGR, CB

SUBJECT: CAMBODIA H1N1 UPDATE - FIRST 5 CASES DETECTED

- 11. (SBU) SUMMARY. As of June 25, the Cambodian Ministry of Health (MOH) has reported five cases of laboratory-confirmed novel influenza A (nH1N1) in humans, representing the first identified nH1N1 infections in Cambodia. Four of the five cases occurred among a 40-member church mission delegation from the U.S. that arrived in Phnom Penh on June 19. The fifth case, unrelated to the U.S. delegation, arrived at the Poipet border crossing from Thailand on June 24. All cases were initially hospitalized for mild to moderate illnesses and have since shown clinical improvement, with the four AmCits being discharged to their delegation's guest house in Phnom Penh on June 25. The fifth case remains hospitalized but has shown clinical improvement. The MOH and World Health Organization (WHO), with technical support from Institut Pasteur in Cambodia (IPC) and the U.S. Centers for Disease Control and Prevention (CDC), have rapidly investigated all suspected and confirmed cases to date, and continue to conduct surveillance for new suspect cases among potential contacts of the confirmed cases. A MOH-WHO press release issued on June 24 re-emphasized general prevention measures and provided MOH Influenza Hotline numbers for public inquiries or suspected case reporting. END SUMMARY.
- 12. (SBU) The first confirmed case, a 16-year-old female, developed fever, cough, and headache on June 20 and was seen at a local health clinic in Phnom Penh on June 22. A diagnosis of suspect nH1N1 infection was made, and clinical samples were collected for real time polymerase chain reaction (rt-PCR) testing at IPC. Test results on June 23 confirmed nH1N1 infection. The patient was transferred to Calmette Hospital, a designated national nH1N1 referral hospital, later that evening for isolation and treatment with Tamiflu (oseltamivir).
- 13. (SBU) Subsequent to the identification of the first case, three additional cases among the U.S. delegation, ages 18 to 20 years, developed fever and flu-like symptoms between June 21-24 and later tested positive for nH1N1. All three were also hospitalized at Calmette Hospital for isolation and treatment with Tamiflu.
- 14. (SBU) To prevent further transmission among the delegation, the MOH, WHO, and CDC decided to provide prophylactic doses of Tamiflu to the rest of the unaffected members, along with ample amounts of disposable face masks and alcohol hand wash as part of general infection control measures. The delegation was also instructed to isolate the recently discharged confirmed cases in a separate area of the guest house until at least seven days after the onset of their illnesses have passed. Delegation supervisors agreed to this plan after detailed discussions with MOH, WHO, and CDC on June 25.

- 15. (SBU) CON Chief, CDC Director and post health unit local employee visited the four AmCit patients on June 25. All took appropriate precautions to ensure no further risk of contagion during the visit. The four AmCits provided verbal Privacy Act waivers allowing the Consular Section to communicate with their parents and group leaders regarding their condition. Written Privacy Act waivers could not be obtained without entering the isolation ward. CON Chief observed the four patients through a clear glass window into the isolation ward and spoke with them via telephone. None reported any concerns with their ongoing treatment or with their medical conditions, and none requested that CON Chief pass any messages to family or friends. All four patients had been in direct contact with their parents and group leaders (they had a cell phone in their isolation ward).
- 16. (SBU) The fifth case, a 53-year-old Filipino male, presented to quarantine officials at the Poipet border crossing on June 24 with a two-day history of fever and difficulty breathing. A MOH Rapid Response Team (RRT) was dispatched to Poipet, and the patient was promptly transferred to Siem Reap Referral Hospital by ambulance. Clinical samples were collected upon hospital admission that evening, and rt-PCR results from IPC the next day confirmed nH1N1 infection. The patient remains hospitalized but has demonstrated clinical improvement.

RODLEY